Application or Docket Number

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CLAIMS AS FILED - PART I (Column 1) (Column 2)											LL E	7 <u>~</u> ( NTITY			ER THAN
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ULTIPLE DEPENDENT CLAIM PRESENT										X39=			OR	X78=	78
If the difference in column 1 is less than zero, enter "0" in column 2										+130=			OR	+260=	
OI AIMO AO AAA										TOTAL	L		OR	TOTAL	828
T			(Col	umn 1) Aims		(C	olumn 2)	ျှန် <sup>မို</sup> (Column 3)	; • .	SMALI	L EN	TITY	OR		R THAN ENTITY
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	"								ADD	TOTAL IT. FEE		o	R AD	TOTAL DIT FEE	
	L		. Lavion	sıy Paid	For" (Total or	Independ	lent) is the h	3, enter "3." ighest number fo	und i	n the appr	opriate	box in	colum	n 1.	